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Embodied Experiences of Trans Pregnancy

Abstract

Drawing on interview data from the international project Trans Pregnancy: An International Exploration of Transmasculine Practices of Reproduction this article explores embodied experiences of male, trans/masculine and non-binary pregnancy. Moving beyond the spectacle of the ‘pregnant’ man, our analysis builds on existing literature on trans health and embodiment in order to develop a deeper understanding of the lived, bodily complexities of trans pregnancy. We consider the strategies men, trans/masculine and non-binary folks engage in to manage gender presentation during pregnancy and the degree to which pregnancy disrupts the ability to control the presentation of gender. Our analysis contributes to the deconstruction of normative readings of the relationship between gender and the body and highlights the need for improvements in trans and non-binary reproductive healthcare.

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transgender, non-binary, embodiment, pregnancy, reproduction

Introduction

It might be premature to say that, as we enter the third decade of the twenty-first century, pregnant men are ‘everywhere’, but their cultural presence in the Westernised world over the past decade has undeniably accelerated. However, this visibility masks a deeper sense in

which their possibility, their realness, is continuously denied. Either these subjects are not ‘really’ men, have temporarily suspended their masculine status, or are legally defined as ‘mothers’. The spectacle of the ‘pregnant man’, then, seemingly reaffirms its impossibility. The debate this produces has tended to focus on whether or not a man can be pregnant, should be pregnant or why they would want to be pregnant in the first place. The pregnant man has become a cipher for discussions about gender, sexuality, bodies, queerness, technology and transition. Not only does this discourse reproduce the assumption that pregnancy is a quintessentially female experience and one equated only with cis women’s bodies, but it directs the focus onto the ‘man’, rather than the pregnancy.

Drawing on interview data from ‘Trans Pregnancy: An International Exploration of Transmasculine Practices of Reproduction’, a qualitative project on male, trans/masculine and non-binary¹ reproduction, the aim of this article is to explore embodied experiences of trans pregnancy beyond the ‘pregnant man’ (see also Pearce and White, 2019). The article is influenced by feminist post-structuralist scholarship, which understands gender identity and practice as socially produced and culturally contingent, thus asking how (and what form of) gender is produced through pregnant embodiment (Butler, 1990, 1993; Grosz, 1994). It is also shaped by sociological work on body projects wherein the body is seen as a site of identity construction that is subject to flux, and by subsequent work in a sociology of the body, which grounds embodied agency through its focus on the relational dimensions of corporeality (Featherstone, 1991; Gill et al., 2005; Shilling, 2012). In this context we consider the strategies trans and non-binary folks engage in to manage gender presentation during pregnancy and the degree to which pregnancy disrupts the ability to control the presentation of one’s gender in accordance with discourses of body malleability central to trans embodiment more widely.

The article is indebted to and builds on work on the body in transgender studies, and in particular on studies of trans reproduction (More, 1998; Kirczenow MacDonald et al., 2021; Fischer, 2021). Work in this field is central to the deconstruction of normative readings of the relationship between gender and the body as well as to highlighting the need for improvements in trans and non-binary reproductive healthcare. With the aim of contributing to empirical sociological work on gendered embodiment, the article first explores the aforementioned bodies of work, before considering key research findings on how participants negotiated their gender identity and presentation in relation to the traditionally

cisnormative 'female' signifiers of pregnancy. In this way, the article seeks to offer new reflections on embodied subjectivities through trans and non-binary reproductive bodily states, relational and social contexts.

Theorising Pregnancy, Genders and Bodies

Feminist Politics of Reproduction

Across feminist perspectives, conception, gestation, childbirth and child-rearing have been variously theorised as deeply political sites through which dominant notions, practices and experiences of gender are reproduced, negotiated and resisted. The linking of women's subjugation and their reproductive capacity and experience is evident in early feminist work and continues still, characterising a disparate range of feminist texts on the body by writers who argued that male control over women's bodies through reproduction was the beating heart of patriarchy (de Beauvoir, 1949; Rich, 1980; Brownmiller, 1984; Dworkin, 1987; Bordo, 1993; Rubin, 1996).

Some radical feminist re-visions of the male control of female bodies proffered a view whereby science and technology tendered freedom from the constraints of the reproductive body. Strands of radical feminism here reimagine conception and gestation outside of women's bodies. Shulamith Firestone (1970) envisaged a future whereby reproductive technology would free women from what she saw as the barbaric nature of pregnancy and childbirth. Firestone's vision captured the imaginations of feminist novelists such as Marge Piercy (1976) who in *Woman on the Edge of Time* narrated a feminist utopia where children were the products of ectogenesis. Central to this feminist reconceptualization of gendered reproduction was the imagining of a world beyond or outside of gender. However, pregnancy beyond gender, if not beyond the body, has a less science-fiction reality in practices of trans and non-binary reproduction. Feminist scholarship has been pivotal in untying essentialist ideas whereby reproduction is understood as both the instinctive urge and the natural responsibility of women, but the focus of these feminist re-imaginings has largely reflected – and therefore reproduced – a gendered model of pregnancy wherein conception and gestation are firmly tied to the cis² female body (Bordo, 1993; Martin, 1989). Despite a long history of theorising reproduction as a feminist issue there is very little talk of the reproductive

practices and experience of people who are not cis women. At this juncture it is helpful to turn work on the body that has honed-in on gender difference and embodied diversity.

Genders and Bodies

Work by Candace West and Don Zimmerman (1987) on the ‘doing’ of gender – whereby gender was understood as something that is ‘done’ rather than something that simply ‘is’ – was foundational for the development of post-structuralist feminist theory and queer theory. In seeking to problematize a naturalized correlation between sex, gender identity and sexuality, or, as Judith Butler (1990) termed it, the ‘heterosexual matrix’, this illuminated the construction and artifice of gender per se; gender is ‘real only to the extent that it is performed’ (Butler, 1990: 278) and cemented through repetition. This shows the impossibility of reading the body, identity and sexuality outside of discourse – or as external to politics and culture. Further, through this framework, sex, as well as gender, became denaturalized as the distinction between the two categories was unpacked: ‘if gender is the social significance that sex assumes within a given culture [. . .] then what, if anything, is left of “sex” once it has assumed its social character as gender?’ (Butler, 1993: 5). While some feminist scholars worked to unpack the distinction between sex and gender (Delphy, 1984; Grosz, 1994; Moi, 1999), others sought to emphasise the non-binary nature of bodies themselves (Kessler and McKenna, 1978; Dreger, 2000; Fausto-Sterling, 2000; Roughgarden, 2004). These bodies of work provide vivid accounts of the diversity of gendered bodies as they exist on a spectrum in ways that contest dualist readings of nature/culture – or sex/gender.

Transcending the nature/culture binary provided a way of thinking about the body outside of a previously dominant feminist focus on the docile body; an endeavour that was also central to work as it developed in what has broadly become known as a ‘sociology of the body’. Here the body is understood as central to the making – and remaking – of the self (Featherstone, 1991; Shilling, 2012) through work on body projects, ‘attempts to construct and maintain a coherent and viable sense of self-identity through attention to the body, particularly the body’s surface’ (Gill et al., 2005: 40). This field is adjoined to theories of trans embodiment in the centring of a certain malleability of the body which is also central to dominant understandings of trans subjectivity – physical transition understood as a project of self-reflection played out in/on the flesh (Wickman, 2003). Of particular interest with regards pregnancy is the extent to which it is compatible with this sort of body project.

While the primacy of the body for (cis) women's everyday lives, identities and social practices has a long history in feminist work, the significance of the body in the construction of masculinity is more of a recent development. Empirical studies on the embodied nature of masculinity are diverse, encompassing topics such as the economy and the workplace, consumption, health, the media, education, sport and interpersonal violence, as sites of the construction of hegemonic masculinity (Connell, 1995). However, work on masculinity and embodiment has largely concerned the experiences and practices of cis men, leaving trans/masculine, not to mention non-binary, bodies unaccounted for within the social sciences.

Trans Embodiment

As Elijah Adiv Edelman and Lal Zimman point out, 'historically, trans-specific research on the body has focused on medical or surgical procedures rather than critically examining the relationships between gender identity, sexuality, and genitals' (2014: 676, see also Stone, 1991; Nataf, 1996; Stryker, 1994; Roen, 2001). Work by Jack Halberstam (1998), Jay Prosser (1998) and Jason Cromwell (1999) broke new ground in exploring lived trans male and masculine embodiments. Trans embodiment studies has also sought to theorise the wide range of intersecting experiences within trans communities, evident in work on race (Ellison et al. (2017)), transmisogyny (Serano, 2007), social class (de Vries, 2012), size (White, 2014, 2020) and disability (Baril, 2015). A review of literature that can be clustered under the interdisciplinary field of Trans Studies, suggests that, although the field is relatively new, it is acutely aware of the importance of an intersectional analysis. Kylan Mattias de Vries thus writes: 'transitioning throws the multi-dimensionality of intersected identity frames into sharp relief against the background of intersecting social and cultural structural arrangements' (2012: 50).

Later work from the social sciences and humanities has broadened the scope to examine the ways in which trans male embodiment is produced and experienced in relation to medical and legal discourse and practice wherein bodily technologies are key to citizenship rights. Edelman and Zimman thus argue that 'these technologies, such as hormone treatment and surgery, serve as "correction" in terms of both the political demands of trans subjects to be "normal", as well as the very real discomfort felt by many trans subjects' (2014: 677). Moreover, as work by writers such as Surya Monro (2003), Jack Halberstam (2005), Aren

Aizura (2006), Susan Stryker (2008), Sally Hines (2009) and Emily Grabham (2007) has argued, routes to citizenship are highly racialized, classed and heterosexualised.

Trans/masculine and non-binary bodies – like other marginalised bodies – cannot, then, be considered outside of medical, political, economic and social systems underpinned by ‘sets of rules valorizing Whiteness, (re)production, consumption, depoliticization, and only the most privileged, normative forms of gendered and sexed embodiment’ (Edelman and Zimman, 2005: 678).

Given the above, our project was designed through a framework in which the corporeal body is always a deeply political body. Next, we contextualise the project within recent social and cultural shifts and outline our methodology.

Trans Pregnancy: An International Exploration of Trans Masculine Practices and Experiences of Reproduction.

Trans parents and families are receiving increasing attention in social, cultural, legal, policy and medical fields. Of particular significance to questions around gendered embodiment and bearing a child are the experiences of men, trans/masculine and non-binary people who become pregnant and give birth. Current legal and policy debates concerning the rights and recognition of trans people also concentrate on the issues of health and family life, including cases of trans people who are seeking to change their parental role from that of ‘mother’ on their child’s birth certificates. These issues matter not only in terms of social and cultural understandings of contemporary practices of gender, sexual and intimate diversity, but also in terms of their normalising effects; making possible what might be unthought-of for others. Attempts to quantify pregnancy and birth among trans/masculine and non-binary people point to rapidly increasing visibility amongst trans populations worldwide. For example, in a US study of sexual and reproductive health among trans and gender-expansive people assigned female or intersex at birth, twelve percent of 1694 respondents reported having been pregnant (Moseson et al., 2020) and Medicare figures in Australia record 262 men giving birth between July 2012 and June 2021 (Medicare Australia, 2021). An international Facebook group for trans birth parents and their allies has attracted over 5700 members since its inception in 2015. First-person accounts of being pregnant as a trans man (Beatie, 2009; Ware, 2015; MacDonald; 2016) and the limited existing academic literature on trans

parenting and pregnancy (Light et al., 2014; James-Abra et al., 2015; Obedin-Maliver and Makadon, 2016; Tornello and Bos, 2017; Charter et al., 2018; Lampe et al., 2019) also indicate that increasing numbers of trans men are seeking to become pregnant. This work points to the need for future healthcare practice and policy globally to take account of the specific requirements of men, trans/masculine and non-binary individuals who become pregnant and give birth, and signposts the sociological importance of trans reproduction. It is from this juncture that the project 'Trans Pregnancy: An International Exploration of Transmasculine Practices of Reproduction' emerged.

The data on which this article draws emerges from this on-going project. The project seeks to provide an in-depth understanding of the feelings, experiences and health care needs of trans people who wish to or become pregnant, including trans/masculine and/or non-binary individuals as well as men. We are a team of researchers who, over the past decade, have undertaken research in the fields of sociology, psychology and trans studies with transgender and non-binary people and/or their family members. Our focal areas include but are not limited to family formation, parenting, intimate relationships and healthcare. As a team we are comprised of cisgender, transgender, and non-binary people, of a diversity of genders and sexualities, one of whom has conceived and carried a pregnancy. All of us are White and we are critical regarding the role of Whiteness in shaping our research and research process and mindful that we currently occupy a privileged social location as academics.

The project has produced original qualitative data sets across three participant groups: young trans men and non-binary individuals, health practitioners and professionals, and trans men or non-binary individuals who have been pregnant and/or given birth. This article draws on the latter data set, wherein 52 one-to-one semi-structured interviews were conducted between 2018 and 2020. Participants were recruited through social media or circulated via researcher networks and community members. Inclusion criteria were to identify as male, transmasculine, and/or non-binary, to have had at least one pregnancy after beginning some form of social and/or physical transition, to be over the age of 18, and to live in the European Union (including the UK), Australia, the US or Canada. Ages ranged from 21 to 47 years old at the time of interview, with the majority of participants being in their thirties. The vast majority of participants were white, although some identified as Black, Hispanic or mixed-race. The majority of participants identified as middle class, though 50% of UK participants and 27% of US and Canadian participants identified as poor or working class. Most lived in

urban locations, although we did interview people who lived in small towns or rural areas. When asked what term they used to define their gender, participants used a variety of terms including man or male, trans man, trans masculine, non-binary, genderqueer, genderfluid and greygender. The vast majority of participants used he/him or they/them pronouns, although a small number used other non-gendered pronouns such as xie/xir, or preferred she/her. A range of terms were also used to define sexuality including gay, queer, pansexual, bisexual and straight or hetero. Most participants were in relationships with either cis, trans or non-binary partners. Most participants had one child, several had two and some had three or four children.

The research was granted ethical approval by participating universities, but also followed best practice in conducting sensitive, reflective and ethical research with trans people and communities (Adams et al., 2017). During the research participants had the opportunity to choose their own pseudonyms and the interviews were recorded and transcribed. Transcripts were coded through thematic analysis. As Braun and Clarke (2006) set out, this entailed repeated readings of the data; first to familiarise the researcher with the data and then to identify repeated topics, or codes, across the data until thematic saturation is reached. Following a constructionist framework, thematic analysis allows for the emergence of themes as seen as significant by the researcher. Since pregnancy is so strongly socially coded as a (if not *the*) signifier of femaleness, we were interested in the ways trans/masculine and non-binary research participants experienced their pregnant bodies. Hence, the analysis that follows centres around questions of embodiment, specifically the ways participants talked about their pregnant bodies and their accounts of how their bodies were read and reacted to by others while pregnant. In the following sections, participants' accounts are considered at individual and social levels through the themes of bodily change and embodied pleasure as 'private bodies'; bodily presentation and misgendering as visible 'public bodies'; and finally erasure via the invisibility of the pregnant trans body.

Pregnant Trans Bodies

Existing literature on male and trans/masculine pregnancy has often, with good reason, focused more on the healthcare needs of this population (Obedin-Maliver, 2015), however, there is less work on the embodied experiences of trans pregnancy. This is especially the case for people who fall outside the dominant narrative of the 'pregnant man' that carries an

expectation of a stable male/masculine gender identity and presentation, physical/medicalised hormone transition and, prior to pregnancy, a high degree of ‘passing privilege’. Our participants may have shared a common experience of non-identification with womanhood, but they did not universally experience the disconnect between ‘maleness’ and ‘pregnancy’ that is sometimes thought to be the ‘problem’ at the heart of trans pregnancy, nor were their embodied experiences determined by how they identified (as male, trans/masculine, non-binary, genderqueer and so on). In order to approach this analysis, then, we did not assume in advance any particular gendered identity/body, but instead asked how and what possibilities for gendered embodiment pregnancy produced for our participants.

Private Bodies

In speaking about their bodily experiences while pregnant, participants often distinguished between embodied experiences in private and public spaces. For many, the home was a space in which to enjoy their pregnant body, be it alone or with partners, family members and friends. Jonathan, for example, said:

I ended up leaving work fairly early [...] once I was at home and I was in my own bubble, I really lived it, it was a really nice experience. And I thought that probably that made the experience a bit better for me because I think if I'd probably been trying to engage with the world once I was further along in the pregnancy I probably would have struggled socially a lot more than I did. But I got to spend the end part at home [...] and it was nice. I really did think that my body was going to be my biggest source of dysphoria around anxiety and all that kind of stuff, but actually once I was left to my own devices, I was more than happy. I enjoyed having a bump. I enjoyed, yeah, I mean obviously I didn't enjoy having back pain and that kind of stuff that came with it, but yeah, there was no part of it that I was uncomfortable with when I was in my own bubble’
(Jonathan, UK)

Similarly Pyxl (Canada) spoke of the familiar issues related to the physical discomfort of pregnancy saying, ‘it was more of a nuisance in the way that it’s a nuisance to anybody who’s pregnant. Just various bodily discomforts’. In likening the experience to ‘anybody who’s pregnant’ Pyxl suggests being pregnant, in private at least, was not an exceptionally ‘trans’ experience.

Many of the participants talked at length about enjoying their pregnancy and spoke of the pleasures they experienced in their pregnant bodies. For Evan, a sense of embodied congruence accompanied the experience of pregnancy:

I felt great. I was really excited. I was on the verge of doing something I had always been told I couldn't do, and it felt like the most right thing my body had ever done. There are so many times I've sort of struggled with my gender or how my body looks or feels or works, and all of that was irrelevant. (Evan, US)

Evan's sentiments were echoed by other participants, for example Luke for whom pregnancy brought a time of embodied peace that was in contrast to some of the complexities he had previously felt in relation to his body and gender:

I felt more like a trans man than ever before because my body was doing something that if I had been born biologically male it definitely wouldn't have been doing, but I felt ... I felt actually more connected to it [...]. My body wasn't letting me down like it had let me down through childhood when I finally realized I wasn't going to wake up one day and be a boy. My body was doing something that it was biologically intended to do. (Luke, US)

The feelings of 'rightness' reported by both Evan and Luke indicate a subjective experience of pregnancy in sharp contrast to dominant discourses that construct it as a basis of femininity (see also Kirczenow MacDonald et al., 2021). Rather, the pregnant body was experienced by many participants as decidedly un-feminine or as an affect of masculinity:

Never felt conflicted, or felt female, or anything like that? When I looked in the mirror I saw a pregnant man. (Travis, US)

I didn't feel like pregnancy was feminine. Even though some people are like, "pregnancy is the height of femininity." For me, that's not true because I was pregnant and I am not feminine. So that can't be true, right? (J, Canada)

However, while these participants spoke of the pleasures of de-coupling pregnancy from the female body and expressions of femininity, other participants found this more difficult, especially in relation to unwanted physical changes as a result of being pregnant. Of particular concern, especially for participants who had not had top surgery³ and stopped

binding during pregnancy, was the changing size and shape of their chest. Charlie (UK), for example, said ‘I had a massive chest anyway and it just got bigger and you couldn't hide it at all’. Yet, while disliking his growing chest, Charlie, like other participants, also spoke about the pleasure of chestfeeding⁴ his baby: ‘I absolutely loved it’, adding that ‘I literally thought of them as udders. That was it. It was not they're tits or they're breasts. [...] Their sole purpose is for my infant to suck on, that was kind of it.’ (Charlie, UK)

Charlie, then, was able to adopt a pragmatic view through disassociating the body part from which he fed his child from the gendered signifiers of ‘breasts’, an aspect illustrated by the common use of the term ‘chest’ rather than ‘breast’ feeding amongst many (but not all) participants. Going beyond Charlie’s pragmatism, Denver, who had two feeding infants at the same time, spoke of the pleasure of feeding:

Yeah, so, breastfeeding, I really enjoyed that. I really like ... I valued my breasts at that time, and that I could sustain my children and feed them and have the bonding and the closeness. And for all of them, I long-term breastfed. Publicly breastfed, even exposing my breasts in public to feed them. (Denver, Australia)

The complexities of these experiences of pregnancy are particularly palpable in the ways in which participants often simultaneously spoke about the same body parts in quite different ways – as a source of discomfort and of pleasure. One reading of this might be to link the feelings of discomfort to a loss of control over the body, or a sort of failure of a body project (Gill et al., 2005), particularly where this shifted others’ readings of that body’s gender. This is in contrast to the pleasure derived from taking back control of the meanings, if not the physicality, of the body as where the participants engage in a pragmatic body project to renegotiate pregnancy and chestfeeding in ways that disassociate them with womanhood or femininity.

Public Bodies / Visible Bodies

As opposed to what happened in private, in public spaces the loss of control over how one’s body was read in terms of gender and other status markers was less easily resolved for participants. In general, a very different account was given of being pregnant in public, which for many participants, was spoken about negatively. Some participants spoke explicitly about this public/private distinction. Chris (Germany), for example, explained: ‘I don’t have a

problem with my body at all. Not at all. I have a problem with other people'. Stevie (UK) echoes this stating, 'when I'm just at home with [partner], I feel fairly comfortable but then I feel like people are looking at me when I'm walking down the street'. This echoes existing research in trans studies (Prosser, 1998; Roen, 2001; White, 2020) in illustrating how experiencing the physical body is always a social endeavour and embodied experience is both contingent on space and place, and is as much, if not more, related to how others view the body as it is connected to individual feelings about the body itself. Having the gender of one's body misrecognised by others can thus be seen to have a direct impact on how the body is subjectively experienced.

One significant theme in the participants' accounts of navigating public space was clothing which emerged as a site through which they attempted to control readings of their pregnant bodies and as a tool through which to more smoothly navigate the social world. Once again chests were a prominent focus and for many participants, top layers of baggy clothing were important to hide their chests – or, more specifically, to divert public attention away from body parts that were so heavily coded as female. In this way Lou (US) said '[...] If I was going somewhere where I felt like I might be less comfortable with someone noticing that I was pregnant, I would wear like a bigger hoody or something like that'. The difficulty in disguising the chest for some participants was exacerbated by not being able to wear a binder, due to discomfort and/or health reasons, during the pregnancy, but more broadly the problem most often encountered was that pregnancy clothes are designed through stereotyped codes of femininity. This was experienced as both stylistically, practically and politically troubling for participants. Pyxl said:

I had a real hard time finding, well anything pregnancy related that wasn't, not just feminine but ultra-feminine, which I found really aggravating from a feminist perspective because I mean come on, there's plenty of cis women that don't want to wear flowers and pink and lace just because they're pregnant. (Pyxl, Canada)

As Pyxl notes, many cis women also are aggrieved by the hyper-femininity of pregnancy wear as research on clothing, fashion and pregnant bodies has indicated (Longhurst, 2005). However, the participants in this study experienced other issues at the nexus of clothing, gender and pregnancy. James, recounts:

I spent the entire pregnancy with giant, rock hard tits like Jessica Rabbit and couldn't wear binders. Apart from anything because the baby pushes everything up and you can't breathe as easy. You put a binder on and you just pass out. And they didn't fit because I was fat. So the tits were a big negative experience for me. I had giant tits and I couldn't, and none of my clothes fit either. The only thing that, I ended up having to buy giant fat man board shorts and I spent the entire last four months of the pregnancy wearing Hawaiian board shorts everywhere, like beachwear – it was tragic, it was fucking tragic – and some big singlets. So I want you to imagine this fat man Jessica Rabbit tits in a singlet and Hawaiian board shorts everywhere.

(James, Australia)

The sense of disgust James feels is palpable, both with regards to his altered physicality and to the clothing he was forced to adopt, with implications that go beyond the gendered presentation of the body. The way he describes his body as out of (his) control positions it as exceeding its usual boundaries, ones that secured for him its masculinity, and a perhaps particular sense of status; the characterisation of 'giant fat man' clothing as 'tragic' speaking here to the class-based stigmatisation of fat men (Monaghan and Malson, 2013). This is also reflected by some of the other participants, usually within narratives of despair concerning the limited range of men's clothing able to accommodate the pregnant body. Mostly participants wore men's leisurewear in larger sizes, and while this worked in terms of comfort some participants bemoaned the lack of stylish or 'professional' attire. Harley (Australia) remarked: 'I didn't look nearly as sharp as I would normally look', while Pete (US) struggled with finding clothes suitable for the workplace: 'buttoned up shirts don't translate well to having a bump, even if you buy them in bigger sizes. It was hard to not be able to go to any professional settings'.

For Neil (Australia), problems of the gender and work appropriateness of clothing were further compounded by location:

I remember posting on certain forums that I'm a member of, trans forums on Facebook, and asking what people did to dress in a way that didn't draw attention to their chest area. But, I live in the tropics whereas most of the people on those forums, a lot of them are North American so they were talking about wearing lots of layers, and that's just not feasible in [location]. So, that was quite hard to try and work out

what the hell am I going to wear. Cause I work in a health sector and I have to look professional as well. (Neil, Australia)

The experiences of clothing the pregnant trans body reveal not only the ongoing oxymoronic (More, 1998) status of the ‘pregnant man’ in the public sphere (absence of non-feminine maternity wear), but also the loss of control over the gendered and classed presentation of the gendered body that these, mainly trans men, were used to exerting in their everyday lives. This loss of control is significant in that experiences of mis-recognition and misgendering⁵ were prevalent in the participants’ narratives. Pregnancy represented for many of them a time in which their ability to present an authentic sense of self to the world was threatened and often erased. Many participants had long-been socially read as male and this could sometimes change with pregnancy. Remarking on this, Lewis (UK) said: ‘I lost my passing privilege’. James talked about how the deep social association of breasts and femaleness re-emerged surprisingly in interactions with people close to him:

the real thing that was a big problem was everyone who had mastered my pronouns and been really good with gender and stuff before I got pregnant, once I got to that point where I had to stop wearing binders and I had giant tits [...] the misgendering got really frustrating, even from people who were previously really, really good. (James, Australia)

While the private space of the home was frequently spoken of as a site of identity security – a place where participants could feel at ease and enjoy the changes in their bodies – for participants such as Rubin, being read as a woman in public spaces brought embodied anxieties, emotional distress and fears around safety:

What was really challenging was the constant gaze on my body as if I was a woman because of my pregnancy, instead of having any validation anywhere I looked for how I felt about my pregnancy. So, I think that probably contributed to a lot of my feelings. And ... lack of safety ... (Rubin, US)

The discussion here has concerned instances where the visibility of pregnancy in social situations brought anxiety and discomfort for participants. Because a pregnant body is so deeply tied in culture to the body of a woman, the gendered identity and presentation of

participants was often negated and, accordingly, they were misgendered. This detrimental impact of coercive femininity in pregnancy contexts is also reflected in Rachel Epstein's (2002) research on the pregnancy experience of butch lesbians, in the interviews Maura Ryan (2013) carried out with masculine identified lesbians about their future desire (or not) for pregnancy and in the interviews conducted by Olivia Fischer with non-binary people who had been pregnant (2021). What is clear is that the discomfort or 'problem' for pregnant trans people was not primarily caused by the pregnancy itself, but by the social and cultural contexts they were pregnant in. As Noam (UK) succinctly puts it: 'It was really hard to explain myself to society but it wasn't hard to explain myself to myself'.

Invisible Bodies

While some participants struggled with being visibly pregnant and the misgendering effects of this, others spoke about how their pregnancy was not recognised because they were read socially as men. Joseph (UK), for example, highlights the theme of invisibility during his pregnancy: 'there was no concept to people that I was anything other than male. So therefore, they couldn't click that that was a pregnancy'. Similarly Mo said:

People don't read pregnant trans people as pregnant in the world, which actually had always been a source of comfort to me because it was a way of escaping the scrutiny. Both without boobs and dressing in a more masculine way, people just don't see a pregnant trans body as pregnant. (Mo, US)

Here Mo gets to the nub of the issue of invisibility in speaking of the unintelligibility of masculine pregnancy (see More, 1998; Riggs, 2014; Toze, 2018). Rather than been seen as pregnant, many of the participants who continued to be read socially as male through their pregnancy were viewed as fat men:

There was a little boy who I overheard, and I was like 39 weeks at this point, but I heard him say, "Mummy, why is that man's belly so big?" You know? And I was in KFC or something. We'd gone for lunch and we're leaving and this guy was properly giving me like, "Why the fuck's that guy so fat?" looks. I really protectively held my belly and like smiled at him, like. (Joseph, UK)

I ran a 5k when I was 39 weeks pregnant, which was kind of hilarious because I passed... My best friend from childhood and I were running, and we were sort of laughing because people would look at me, but it was almost like a fatphobic, "Why is the chubby guy running?" People, just in general in public, people did not read me as pregnant at all ever. (Evan, US)

For most participants, being socially read as a fat man was not experienced problematically, in contrast to those participants previously discussed for whom fatness was in some way threatening to their gender presentation. This is not necessarily a contradiction, as White (2020) argues, fatness is often perceived as an obstacle, *and* is drawn on as a resource, in producing desired gendered embodiments. For some participants then, their fatness was celebrated and masculinising. Indeed, frequently, the pregnant belly was positively referred to as a 'fat belly', as reflected by Stevie: '[...] it's like a fat man's belly. My Uncle Andy has the same belly. You know what I mean? [...] And the belly, I enjoy in a way [...] Just be like oh look at my big belly' (Stevie, UK). There is a marked contrast in the way in which most of our participants talked positively about fatness during pregnancy to that of research with women about body size during pregnancy (see Earle, 2003; Nash, 2012). This reflects the relatively stricter societal requirements around the slenderness of women's and feminine bodies, and the association of bigness with masculinity and/or a spoiled femininity (see Bergman, 2009; Monaghan and Malson 2013; White, 2014).

However, for some of our participants the invisibility of their pregnancy caused problems as they moved through the world being assumed to be male (and therefore, not pregnant). Paul related this incident:

No one offered me a seat on the bus, it was once that I asked for a seat, because it was very crowded and I was very tired. And it was a catastrophe what happened [...] I said "I'm pregnant, I want to sit down." So one person offered me a seat, but another person had ear plugs, did not hear that this seat was for me, that I asked for a seat. So this person took the seat, and I was like, oh what shall I do? Should I dare to ask a second time? And then the other person, next to this person, stood up and offered me the seat. That was so embarrassing to me, that two people offered me a seat, for me asking for a seat. So I never asked again, I was just scared. Because the person with

the earplug didn't understand that I was pregnant, so that was very embarrassing for me. (Paul, Germany)

Far from engendering feelings of safety or comfort, Paul's invisibility as pregnant not only put them in a precarious and potentially dangerous situation, but also reveals again the unintelligibility of trans pregnancy in public – a pregnant body is either female, or it is not pregnant.

Conclusions

This article has drawn on original empirical data from international research on trans reproduction in order to consider the embodied experiences of male, trans/masculine and non-binary people who have experienced pregnancy. Since pregnancy is so heavily coded as a cultural signifier of the female body, the article has explored how participants have negotiated their changing pregnant body with their gendered subjectivities. Our findings indicate some distinct ways in which trans/masculine and non-binary people lived their embodied lives while pregnant. The participants articulated the difficult terrains brought by social visibility and cultural invisibility as pregnant men and non-binary individuals. While the vast majority of participants experienced pleasure in both being and feeling pregnant, this was tempered through social context. In this way, many of our participants distinguished between the pleasures they experienced in their bodies privately – when at home; alone or with partners, family and friends – and the difficulties they encountered when in public, where the meanings of their pregnant bodies were less under their control. Central to this were moments where the pregnant body produced 'wrong' readings of the participants' gender, and in some cases class/status. While many trans and non-binary people endure frequent misgendering in public, for the pregnant participants it was experienced more as a shift in the intensity or consistency of being misgendered. For some participants, misgendering led to the negation of their gender as they became socially read as women, for others, their pregnancy was invisible as they were socially coded as men. Either way marked a moment in which the majority of our participants had to negotiate the troubling terrain of cultural intelligibility.

The embodied troubles of male, trans/masculine and non-binary pregnancy can consequentially be seen to be a social problem, rather than an individual one. Our findings on embodiment resonate with work on abject bodies from disability studies and crip theory, queer studies, fat studies, post-colonial studies, and of course, transgender studies, which seek to illuminate the lived experiences of bodies that are marginalised and/or diverse in form. The intervention here is political in de-naturalizing dominant discourses wherein some bodies are granted the status of normalcy and others branded as deviant.

As meanings, experiences and practices of gender continue to diversify, the social meanings, cultural understandings and embodied states of reproduction shift too. Trans and non-binary reproduction, then, raises, crucial questions for feminist theories of the body and activism on reproductive rights and bodily autonomy more widely. Our research more broadly shows not only that more men, trans/masculine and non-binary people are becoming pregnant but that younger trans men and non-binary people are considering pregnancy in the future. Likewise, as reproductive technologies develop in coming years, it is probable that the numbers of trans women seeking to become pregnant will increase also. We hope that this article is a contribution to the literature on gender fluidity, gendered embodiment and shifting social relations and formations. We also hope that this article offers a strong endorsement of, and contribution to, a politics of trans recognition and bodily autonomy.

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¹ In this article, we use the term ‘men, trans/masculine, and non-binary people’ to refer to those who were coercively assigned female at birth, but report their identity as, for example, male, man, trans, masculine, trans-masculine, non-binary, genderqueer or agender.

² The term cis means to identify with sex as assigned at birth.

³ Surgical procedures carried out on the chest.

⁴ Chestfeeding is used as a more inclusive term than breastfeeding.

⁵ Misgendering describes being mistaken for another gender to that which one identifies.